



Updated 11/27/00; USE F11 to scroll through FIELD STOPS; Double click BOXES to CHECK/UNCHECK; Delete blue text if option not applicable
FORM PTO-1083 1810A-045 (81841.0192)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Robert S. MATSON

Serial No: 09/872,052

Filed: May 31, 2001

For: IMMOBILIZATION OF UNMODIFIED BIOPOLYMERS
TO ACYL FLUORIDE ACTIVATED SUBSTRATES

Art Unit: 1641

Examiner: Gabel, Gailene

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450, on October 28, 2003 Date of Deposit Barry Shuman, Reg. No. 50,220 Name <i>Barry M. Shuman</i> Signature 10/28/2003 Date	
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Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Copy of Chemical Abstract entitled: "Synthesis and Solid State ¹³C and ¹⁹F NMR Characterization of Aliphatic and Aromatic Carboxylic Acid Fluoride Polymers"
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	17	-	71 **		LG=\$18 SM=\$9	\$
INDEPENDENT CLAIMS FEE	1	-	3 ***		LG=\$86 SM=\$43	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145	\$
TOTAL						\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$___ to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$___ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By: *Barry M. Shuman*
Barry Shuman, Ph.D.
Registration No. 50,220
Attorney for Applicant(s)

Dated: October 28, 2003

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Appl. No. 09/872,052

Amdt. Dated 10/28/03

Reply to Office Action of August 13, 2003

Attorney Docket No. 1810A-045 (81841.0192)

Customer No.: 26021

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Robert S. Matson

Serial No: 09/872,052

Confirmation No.: 8141

Filed: May 31, 2001

For: IMMOBILIZATION OF
UNMODIFIED BIOPOLYMERS TO
ACYL FLUORIDE ACTIVATED
SUBSTRATES

Art Unit: 1641

Examiner: Gabel, Gailene

TECH CENTER 1600/2900

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Alexandria, VA 22313-1450

October 28, 2003

Date of Deposit

Barry Shuman, Ph.D., Reg. No. 50,220

Name

Barry Shuman

Signature

Date

AMENDMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated August 13, 2003, please amend the above-referenced application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.